

FOR INSTRUCTIONS, SEE BACK OF FORM**CHECK ONE:**

- ☒ This is an **initial*** Statement of Organization
☐ This is an **amended*** Statement of Organization

**An initial Statement of Organization should be filled within 10 days of the committee's accepting contributions, making expenditures or incurring indebtedness exceeding \$750. Amendments should be filed within 30 days of a change. Penalties may be imposed for late-filed Statements of Organization.*

FORM DR-1 (Rev. 01/2003)	STATEMENT OF ORGANIZATION
For Office Use Only	
Comm. # _____	
Indexed _____	
Audited _____	
Computer _____	

COMMITTEE NAMEGAYLE COLLINS FOR MAYOR**IMPORTANT: Indicate type of committee you are reporting for:**

(1) Statewide/Legislative Candidate (2) Statewide PAC (3) State Party (4) County/Local Candidate (5) County PAC (6) Ballot Issue/Franchise Committee (7) County/City Central Committee (8) Support slate of candidates (list candidates under purpose of committee)

4**COMMITTEE TREASURER**

Name Mary Kit Curran
Mailing Address 4015 Muskogee Avenue
City, State, Zip Code Des Moines, IA 50312
Phone (515) 279-6827
e-Mail mcurran@mchsi.com

COMMITTEE CHAIR

Name David Krudenier
Mailing Address P.O. Box 6246
City, State, Zip Code Des Moines, IA 50309
Phone () _____
e-Mail _____

INDICATE PURPOSE OF COMMITTEE - Check One Box ☒ Advocate for/against candidate(s) ☐ Advocate for/against ballot issue(s)
Comment or description: _____

All Candidates Enter: Mayor of Des Moines
Office Sought: _____

District: Des Moines

Political Party (if applicable) N/A
County/Local Candidates and Local Ballot/Franchise Committees Enter:
County: Polk

Year Standing for Election: 2003
Date of Election: November 2003

Bank Account Name Gayle Collins For Mayor
Name of Financial Institution/type of Account West Bank / Checking
Mailing Address 1601 22nd Street
City, State, Zip West Des Moines IA 50265

Candidate name & Address or Parent Entity (PACs, if applicable), Affiliate, or Sponsor
Gayle Collins
Mailing Address 100 Market Street
City, State, Zip Des Moines IA 50309
Phone (515) 246-0020
e-Mail RealEGayle@aol.com

DISPOSITION OF BALANCE OF FUNDS UPON DISSOLUTION

Indicate disposition of funds by marking appropriate number in box: ☐

- (1) DONATED TO _____ COUNTY CENTRAL COMMITTEE
(2) DONATED TO _____ LOCAL/STATE/NAT'L POLITICAL PARTY (underline one)
(3) DONATED TO CHARITABLE ORGANIZATION (specify) _____
(4) CITY/COUNTY/SCHOOL/STATE OF IOWA GENERAL FUND (underline one)
(5) PARTISAN CONGRESSIONAL DISTRICT FUND

- (6) PRORATED REFUND TO CONTRIBUTORS
(7) TRANSFER TO ANOTHER COMMITTEE OF THIS SAME CANDIDATE (CANDIDATES ONLY)
(8) RETURN TO PARENT ENTITY GENERAL FUND (PACS ONLY)
(9) OTHER (PACS ONLY), PLEASE BE SPECIFIC _____

STATEMENT OF AFFIRMATION BY TREASURER AND CANDIDATE; OR POLITICAL COMMITTEES, BY CHAIRPERSON

I am aware that I am required to file disclosure reports if the committee receives contributions, makes expenditures, or incurs indebtedness in excess of \$750.00 in a calendar year to expressly advocate for any candidate or ballot issue. I understand that although the treasurer normally prepares and files reports, the candidate or chairperson (PACs) is responsible under the law for accurate and timely disclosure reports and that late-filed reports are subject to civil penalties and possible other legal action. I understand that by filing this form, I am subject to the laws found in Iowa Code chapter 56, chapter 68B and administrative rules found in chapter 351. I affirm that all committee officers have been informed of their appointment and obligations.

Signature of Treasurer

Signature of Candidate, OR, if PAC, Central Committee or Local Ballot Issue, Chairperson

Date Signed

Date Signed

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For Office Use Only	
Comm. #	_____
Indexed	_____
Audited	_____
Computer	_____

Hd MAR 9 2004

COMMITTEE NAME ↓ ↓
Gayle Collins for City Council

IMPORTANT: Indicate type of committee you are reporting for: 4
(1)Statewide/Legislative Candidate (2)Statewide PAC (3)State Party (4)County/Local Candidate (5)County PAC (6)Ballot Issue/Franchise Committee (7)County/City Central Committee

COMMITTEE TREASURER (mandatory for all committees)	COMMITTEE CHAIR (mandatory except for a candidate's committee)
Name ↓ ↓ <u>Kit Curran</u>	Name ↓ ↓ <u>David Kudenier</u>
Mailing Address ↓ ↓ <u>4015 Muskogee Avenue</u>	Mailing Address ↓ ↓ <u>715 Locust St</u>
City, State ↓ ↓ Zip Code ↓ ↓ <u>Des Moines, IA 50312</u>	City, State ↓ ↓ Zip Code ↓ ↓ <u>Des Moines, Ia 50309</u>
Phone <u>(515) 280-7313</u>	Phone <u>(515) 284-8116</u>
e-Mail <u>keurran@inahews.com</u>	e-Mail <u>NONE</u>

INDICATE PURPOSE OF COMMITTEE – Check One Box ☐ Advocate for/against candidate(s) ☐ Advocate for/against ballot issue(s)

Comment or description:
All Candidates Enter:
Office Sought: City Council At Large District: _____
Political Party (if applicable): _____ Year Standing for Election: 2004
County/Local Candidates and Local Ballot/Franchise Committees Enter: _____ Date of Election: 5-11-04
County: Polk

Bank Account Name ↓ ↓ <u>GAYLE COLLINS FOR CITY COUNCIL</u>	Candidate name & Address or Parent Entity (PACs, if applicable), Affiliate, or Sponsor <u>GAYLE COLLINS</u>
Name of Financial Institution/type of Account ↓ ↓ <u>West Bank Community Checking Account</u>	Mailing Address ↓ ↓ <u>100 MARKET S.T # 418</u>
Mailing Address ↓ ↓ <u>1601 22nd Street</u>	City <u>DES MOINES</u> State <u>IA</u> Zip <u>50309</u>
City ↓ ↓ State ↓ ↓ Zip ↓ ↓ <u>West Des Moines IA 50266</u>	Phone <u>(515) 246-0020</u>
	e-Mail <u>REALGAYLE@aol.com</u>

STATEMENT OF AFFIRMATION: By filing this document the committee affirms the following:

1. The committee and all persons connected with the committee understand that they are subject to the laws in Iowa Code chapters 68A and 68B and the administrative rules in Chapter 351 of the Iowa Administrative Code.
2. That Iowa Code section 68A.402 and rule 351—4.9 require, the filing of disclosure reports and that the failure to file these reports on or before the required due dates subjects the candidate or chairperson (in the case of committees other than a candidate's committee) to the automatic assessment of a civil penalty and the possible imposition of other criminal and civil sanctions.
3. That Iowa Code section 68A.405 and rules 351—4.38 through 4.43 require the placement of the words "paid for by" and the name of the committee on all political materials except for those items exempted by statute or rule.
4. That Iowa Code section 68A.503 and rules 351—4.44 through 4.52 prohibit the receipt of corporate contributions by all committees except for statewide and local ballot issue PACs.
5. A candidate and a candidate's committee may only expend campaign funds as permitted by Iowa code sections 68A.301 through 68A.303 and rule 351—4.25.
6. That the committee will continue to file disclosure reports until all activity has ceased, committee funds spent, debts resolved, and a final report and a statement of dissolution (DR-3) has been filed.

Kit Curran
Signature of Treasurer

Gayle Collins
Signature of Candidate, OR, for all other committees, Chairperson

3/8/04
Date Signed

2/29/04
Date Signed